Application or Docket Number													1	•	
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003													282	-	
		CLAIMS AS		SMAI TYPE	_	ALLIA —	OR	OTHE SMALL							
TO	TAL CLAIMS		19					RA	TE_	FEE		RATE	-	EE	
FOR			NUMBER FILED		NUMBER EXTRA			BASI	FEE	385.00	OR	BASIC FE	E 770	0.00	
TOTAL CHARGEABLE CLAIMS			/24 minus 20=		. 0			XS	9=		OR	X\$18=			
INDEPENDENT CLAIMS			3 minus 3 =		. 0			X43=			OR	X88≂		\Box	
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT					+145=			OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2									TAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II OTHER TH															
_/-	5-06	(Column 1)		(Colu		(Column 3)	1 1	SM	ALL	ENTITY	OR	SHALI		001-	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT	, .	HIĞH NUM PREVK PAID	BER DUSLY	PRESENT EXTRA	٠	RA	TE	ADDI- TIONAL FEE		RATE	TIC	NAL EE	
	Total	• 14	Minus		70	- /		X\$	9=		OR	X\$18=			
	Independent	• 3	Minus	 (3	= / .		X4	3=	•	OR	X86≃			
٩	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	CLAIM	_/		+14	.5=		OR	+290=			
RCEST 11/0/04/06									OTAL		OR	YOY			
HM:UT											1	ADDIT. PE			
_		(Column 1)			(EST		1			ADDI-	1		A	-100	
AMENDMENT B		REMAINING AFTER			IBER OUSLY	PRESENT		R/	TE	TIONAL	1	RATE		ONAL	ĺ
		AMENDMENT			FOR		1			FEE	4	 	┤╌	EE_	ı
	Total	. 7	Minus	2	-0	•		X\$	9=	1	OR	X\$18:	<u> </u>		l
H	Independent	.3	Minus	***	<u>5</u>	•	l	X	3=	•	OR	X86=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT					بال	J	+1	45 =		OR	+290=		•	Ł
	1 1				•				OTAL		ОЯ	101			
/	12115							ADDI	, FEE		J	ADDIT. F	EEL		
Ψ	10111	(Column 1)			ກາກ 2)	(Column 3)									l
AMENDMENT C	` '	CLAIMS REMAINING		NUM	REST BER	PRESENT	1			ADDI	ı	RATE		DDH	ı
		AFTER		PREVI	OUSLY FOR	EXTRA	V	R/	TE	TIONAL		- FAIR		FEE	5
	Total	AMENDMENT	Minus	- 7	20	- /	1	XS	9=	/	OR	X\$18			Y
	Independent	. 7.	Minus	***	7	- /	1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2_	/	1	Yes	.	/	ı
	FIRST PRESENTATION OF MULTIPLE DEPENDEN				TOLAIM	CLAIM 2			X43=	/	OA		1		l
_	/							+14	15=/	1	OR	+290	·/		
• [I the entry in colu	mn 1 is less than if	he entry in coh	ann 2, writ	e "O" in co	tujin 3.			OZAL		OR	101	4		
-	If the "Highest Nu	mber Previously Pr	aid For IN TH	IS SPACE	is less tha	20, enter 2		ADDIT	,		3.	AUUJ. N			1
	The "Fighest Num	mber Previously Pa ober Previously Pa	id For (Total o	r Independ	sena) is the	highest numb	er to	undjih	aue st	propriate bo	ur un C	July 11.			1

FORM PTO-875 (Rev. 10/03)